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Bib Data Sheet

SERIAL NUMBER 10/728,014	FILING DATE 12/04/2003 RULE	CLASS 428	GROUP ART UNIT 1775	ATTORNEY DOCKET NO.					
APPLICANTS Purusottam Sahoo, Sugar Land, TX; Shane M. Richard, Deer Park, TX; Cyril Stephen Magda JR., Magnolia, TX;									
** CONTINUING DATA ***** <i>none due</i>									
** FOREIGN APPLICATIONS ***** <i>none due</i>									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials </td> <td style="width: 15%; text-align: center; vertical-align: top;"> STATE OR COUNTRY TX </td> <td style="width: 10%; text-align: center; vertical-align: top;"> SHEETS DRAWING 1 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> TOTAL CLAIMS 14 </td> <td style="width: 20%; text-align: center; vertical-align: top;"> INDEPENDENT CLAIMS 4 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	STATE OR COUNTRY TX	SHEETS DRAWING 1	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 4
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ADDRESS Francis C. Hand, Esq. c/o Carella, Byrne, Bain, Gilfillan Cecchi, Stewart & Olstein 5 Becker Farm Road Roseland, NJ 07068									
TITLE High temperature clearance coating									
FILING FEE RECEIVED 856	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____
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